PTO/SB/06 (12-04) Approved for use through 7/31/7008, CMB 0651-003

Under the Paperwork Reduction Act of 1995, no parsons are required to respond to a consistion of information unless it displays a yeld OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective Occember 8, 2004 APPLICATION AS FILED - PARTI · (Column 1) OTHER THAN (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED MUMBËR EXTRA WIC FEE RATE (1) RATE IS 97 CFR 1.16(1), (b), or (c)) ŅľA N/A FEE (8) NA SEARCH FEE F7 CFR 1 16(4, (1, or (m)) 150.00 N/A 300.00 NA. N/A \$260 **EXMENATION FEE** N/A \$500 (1) CFR 1.16(d. (p), or (d)) NA N/A NA \$100 TOTAL CLASHS NIA \$200 DI OFR 1:16(1) minus 20 · X\$ 25 HOEPENDENT CLAMS X\$50 OR (37 CFR 1.16(N) minus 3. X100 X200 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (07 CPR 1.16(4)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160) +180= +360± "If the difference in column 1 is tess than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II 9/12/07 (Calumn 1) (Column 2) OTHER THAN (Cohimn 3) SMALL ENTITY OR CLAIMS HIGHEST SMALL ENTITY REMAINING PRESENT: NUMBER AFTER MENOMENT RATE (1) ADDI. MENDMENT PREVIOUSLY RATE (1) **EXTRA** ADOL TIONAL PAID FOR Or Cra Lieu TIONAL FEE (\$ Minus 2 FEE (1) X\$ 25 Independent PICFA LIGHT X\$50 Minus OR X100 Application Size Fee (37 CFR 1.18(s)) X200 **OR** RRST PRESENTATION OF MEATIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360a OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT AFTER MENDMENT RATE (1) ADDI-PREVIOUSLY EXTRA RATE (1) PAID FOR TIONAL Total prom Lings Minue FEE (1) FEE (1) X\$ 25 . independent of the Liens X\$50 OR Minus X100-Application Size Fee (37 CFR 1.16(s)) X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPR 1.160) +180= +360± OR TOTAL TOTAL ADO'L FEE OR e if the entry in column 1 is less than the entry in column 2, write "O' in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ADD'L FEE "If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The Highest Number Previously Paid For" (Total or independent) is the highest number (ound in the appropriate box in column 1.

Display the Highest Number Previously Paid For" (Total or independent) is the highest number (ound in the appropriate box in column 1.

Display the public which is to file (and by the public which is to file (and by the lide pathoring, preparing, and submitting the completed application form to the USPTO. Three we very depending upon the individual case. Any comments is amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Paterd tadamark Office, U.S. Dependment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS tess. SEND TO: Commissioner for Patents. P.O. Box 1450, Alexandria, VA 22313-1450. ESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.